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# United States Bankruptcy Court Middle District of Tennessee, Nashville Division

IN RE:		Case No
Lancaster, Michael Edward & La	,	Chapter 7
	Debtor(s)	
	VERIFICATION OF CREDITOR	MATRIX
The above named debtor(s) here	by verify(ies) that the attached matrix listing of	creditors is true to the best of my(our) knowledge.
Date: August 25, 2019	Signature: /s/ Michael Lancaster	
2	Michael Lancaster	Debtor
Date: August 25, 2019	Signature: /s/ Adrianne Lancaster Adrianne Lancaster	V. D. L.
	Aurianne Lancaster	Joint Debtor, if any

Lancaster, Michael Edward (D) 317 Liberty Bell Ln Clarksville, TN 37040-2740

Lancaster, Adrianne Michelle (D) 317 Liberty Bell Ln Clarksville, TN 37040-2740

Law Offices of Robert H. Moyer (DA) 408 Franklin St Clarksville, TN 37040-3424

Best Buy/CBNA (U) PO Box 6497 Sioux Falls, SD 57117

Capital One (U)
PO Box 30281
Salt Lake City, UT 84130-0281

Capitol One Bank USA (U) PO Box 30281 Salt Lake City, UT 84130-0281

Capitol One Services (U) PO Box 70886 Charlotte, NC 28272-0886

Cash America (U) 659 Providence Blvd Ste A Clarksville, TN 37042-7740

CCB/DNTLFRST (U)
PO Box 182120
Columbus, OH 43218-2120

Comcast (U) PO Box 105257 Atlanta, GA 30348

Credit One Bank (U) Po Box 98872 Las Vegas, NV 89193

Eagle Finance (U)
7791 Dixie Hwy Ste B
Florence, KY 41042-2602

FRPG , PLLC (U) PO Box 440151 Nashville, TN 37244-0151

FRPG LLC (U)
PO Box 440151
Nashville, TN 37244-0151

I C Stsyems Collections (U) PO Box 64378 Saint Paul, MN 55164-0378

Inversion Ultrasound (U) 2320 Wilma Rudolph Blvd Clarksville, TN 37040-8960

Kentucky Higher Education (U)
PO Box 24328
Louisville, KY 40335-0328

Kentucky Utilities (U) 380 Airport Rd Greenville, KY 42345-1780

LG & E (U) 820 W Broadway Louisville, KY 40202-2218

Loancare Servicing Center (S) 3637 Sentara Way Ste 303 Virginia Beach, VA 23452-4262

Medicredit Corp. (U) PO Box 1629 Maryland Heights, MO 63043-0629 Montgomery COunty EM (U) 601 Dunlop Ln Clarksville, TN 37040-5015

Nissan Motor Acceptance (S) PO Box 660366 Dallas, TX 75266-0366

One Main Financial (U) PO Box 1010 Evansville, IN 47706-1010

Pamela Pennington, Ph D. (U) 1854 Memorial Dr Clarksville, TN 37043-4603

Pay Pal Credit (U) PO Box 71202 Charlotte, NC 28272-1202

Pay Pal Credit (U) PO Box 960006 Orlando, FL 32896-0006

Progressive Leasing (S) 5651 W Talavi Blvd Glendale, AZ 85306-1884

SNAP (U) 1497 E Baseline Rd Ste 4-109 Gilbert, AZ 85233-1294

Tri-Star Centennial (U) PO Box 290429 Nashville, TN 37229-0429

US Dept of Ed/GL (U) 2401 International Ln Madison, WI 53704-3121

US Dept. of Ed/GL (U) 2401 International Ln Madison, WI 53704-3121

USAA Fed. Savings Bank (U) PO Box 47504 San Antonio, TX 78265-7504

USAA Fed. Savings Bank (U) 9800 Fredericksburg Rd San Antonio, TX 78288-0001

USAA Savings Bank (U) 10750 McDermott Fwy San Antonio, TX 78288-0002 Vanderbilt University Medical Cente (U) Dept. 1171 PO Box 121171 Dallas, TX 75312-1171

Fill in this	Il in this information to identify your case:				
Debtor 1	Michael Edward L	_ancaster			
	First Name	Middle Name	Last Name		
Debtor 2	Adrianne Michelle	e Lancaster			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	ruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE, NASHVILLE DIVI	SION	
Case number (if known)					Check if this is an amended filing

# Official Form 108

# Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Loancare Servicing Center	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of property  317 Liberty Bell Ln, Clarksville, TN 37040-2740	<ul><li>Retain the property and enter into a <i>Reaffirmation Agreement</i>.</li><li>Retain the property and [explain]:</li></ul>	■ Yes
securing debt:		
Creditor's Nissan Motor Acceptance name:	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of 2018 Nissan Titan 2WD	Retain the property and enter into a Reaffirmation Agreement.	Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's Nissan Motor Acceptance	☐ Surrender the property.	■ No
name:	☐ Retain the property and redeem it.	_
Description of 2018 Nissan Murano AWD	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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	otor 1 otor 2 <b>Lancaste</b>	r, Michael Edward & Lancaste	r, Adrianne Michelle Case number (if known)	
s	ecuring debt:			-
	Creditor's <b>Progre</b>	essive Leasing	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
р		sher and dryer, tables, tv nds, couches, love seats, ds,	<ul> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul>	■ Yes
For a	any unexpired person pe	Do not list real estate leases. Unex	In Schedule G: Executory Contracts and Unexpired coincides are leases that are still in effect; the least trustee does not assume it. 11 U.S.C. § 365(p)(2).	
Des	cribe your unexpi	red personal property leases		Will the lease be assumed?
Les	sor's name:	ADT		□ No
				■ Yes
	cription of leased perty:	Security system		
Les	sor's name:	Directv		□ No
				■ Yes
	cription of leased perty:	Satellite		
Les	sor's name:	Verizon		□ No
				■ Yes
	cription of leased perty:	Cellphones, watch		
Part	3: Sign Below			
Unde	er penalty of perju	ry, I declare that I have indicated m t to an unexpired lease.	ny intention about any property of my estate that secu	res a debt and any personal
	/s/ Michael Lar	-	X /s/ Adrianne Lancaster	
	Michael Edwar	d Lancaster	Adrianne Michelle Lancaster	
	Signature of Debte	or 1	Signature of Debtor 2	
	Date Augus	st 25, 2019	Date <b>August 25, 2019</b>	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
MIDDLE DISTRICT OF TENNESSEE, NASHVILLE DIVISION			
Case number (if known) Chapter you are filing under:			
	Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	☐ Chapter 13		Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

page 1

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself			
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
Your full name			
Write the name that is on your government-issued	Michael First name		Adrianne First name
example, your driver's	Edward		Michelle
license or passport).	Middle name		Middle name
Bring your picture	Lancaster		Lancaster
with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years			
Include your married or maiden names.			
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7494		xxx-xx-8026
	Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Michael First name  Edward Middle name  Lancaster Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  XXXX-XX-7494	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Michael First name  Edward Middle name  Lancaster Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		317 Liberty Bell Ln Clarksville, TN 37040-2740 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Montgomery County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor	1	
Debtor	2	

# Lancaster, Michael Edward & Lancaster, Adrianne Michelle

Case number /	(if known)	
Case number (	(if known)	

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Cha	apter 7					
		☐ Cha	apter 11					
		☐ Cha	apter 12					
		☐ Cha	apter 13					
8.	How you will pay the fee	_ a	bout how yo	u may pay. Typical ey is submitting you	ly, if you are paying the fee yours	with the clerk's office in your local court for more detai elf, you may pay with cash, cashier's check, or money ttorney may pay with a credit card or check with a		
						sign and attach the Application for Individuals to Pay	The	
			•	Installments (Officia of my fee be waive	,	only if you are filing for Chapter 7. By law, a judge may	, but i	
		r y	ot required to our family si	o, waive your fee, a ze and you are una	and may do so only if your income	e is less than 150% of the official poverty line that apple. If you choose this option, you must fill out the <i>Applic</i>	lies to	
9.	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by	■ No						
	an affiliate?							
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
		☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment against	you?		
				No. Go to line 12				
							f this	

Debtor	1	
Dehtor	2	

# Lancaster, Michael Edward & Lancaster, Adrianne Michelle

Case number (if known)
------------------------

Part	Report About Any Bus	sinesses Y	ou Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busin	ess		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, State	& ZIP Code		
	to this petition.		Chec	k the appropriate box t	to describe your business:		
				Health Care Busines	ss (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real E	state (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as defi	ned in 11 U.S.C. § 101(53A))		
				Commodity Broker (	as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	. If you in s, cash-flo	dicate that you are a sr ow statement, and fede	art must know whether you are a small business debtor so that it can set appropriate mall business debtor, you must attach your most recent balance sheet, statement of eral income tax return or if any of these documents do not exist, follow the procedure in 11		
	For a definition of small	■ No.	I am r	not filing under Chapte	er 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am f	iling under Chapter 11	and I am a small business debtor according to the definition in the Bankruptcy Code.		
Part	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any F	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		What is	the hazard?			
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?			
					Number, Street, City, State & Zip Code		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

C000	number	// I	
case	number	(if known)	

16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incur individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you o	we that are not consumer debts or busin	ness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. l paid that funds will be availa	Do you estimate that after any exempt pr ble to distribute to unsecured creditors?	roperty is excluded and administrative expenses are		
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	<b></b> 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	50,001-100,000		
		□ 100-19 □ 200-99		□ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to	□ \$0 - \$50,000 □ \$50,001 - \$100,000 ■ \$100,001 - \$500,000		□ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion		
	be worth?			□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
		□ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million			
20.	How much do you	□ \$0 - \$5		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	<b>5</b> 50,001 - \$100,000		□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
			01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 millior			
Part	7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
				7, I am aware that I may proceed, if eliqailable under each chapter, and I choose	gible, under Chapter 7, 11,12, or 13 of title 11, United to proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		case can r		, or imprisonment for up to 20 years, or	y or property by fraud in connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  e Lancaster		
		Michael	Edward Lancaster	Adrianne N	lichelle Lancaster		
		Signature	of Debtor 1	Signature of I	Debtor 2		
		Executed (	on August 25, 2019	Executed on	August 25, 2019		

Debtor	1	
Debtor	2	

Lancaster, Michael Edward & Lancaster, Adrianne Michelle

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert Moyer	Date	August 25, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
Robert Moyer		
Printed name		
Law Offices of Robert H. Mover		
Firm name		
408 Franklin St		
Clarksville, TN 37040-3424		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	rhmoyer@bellsouth.net
Robert Moyer		
Bar number & State		

Dobtor 1	o information to lability you	r case and this filing:		
Debtor 1	Michael Edward Lanca	aster Middle Name Last Name		
Debtor 2	Adrianne Michelle Lan			
Spouse, if filing)	First Name	Middle Name Last Name		
Jnited States Bar	nkruptcy Court for the: MIDD	LE DISTRICT OF TENNESSEE, NASHVILLE DIVISIO	N	
Case number _				☐ Check if this is an amended filing
_	<u>rm 106A/B</u>			
schedul	e A/B: Propert	у		12/15
■ Yes. Where is				
.1		What is the property? Check all that apply		
	v Bell I n	■ Single-family home	Do not deduct secured cla	
317 Libert	ry Bell Ln if available, or other description		Do not deduct secured cla the amount of any secured Creditors Who Have Clain	d claims on Schedule D:
317 Libert Street address,	if available, or other description	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount of any secured	d claims on Schedule D:
317 Libert Street address, Clarksville	if available, or other description  TN 37040-27	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	the amount of any secured Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
317 Libert Street address,	if available, or other description	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land	the amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$200,000.00	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$200,000.00
317 Libert Street address, Clarksville	if available, or other description  TN 37040-27	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other	Current value of the entire property? \$200,000.00  Describe the nature of you (such as fee simple, tens	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$200,000.00
317 Libert Street address, Clarksville	if available, or other description  TN 37040-27	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  Who has an interest in the property? Check one	Current value of the entire property? \$200,000.00  Describe the nature of yo (such as fee simple, tena a life estate), if known.	current value of the portion you own? \$200,000.00  currentspirely.
317 Libert Street address, Clarksville	if available, or other description  TN 37040-27	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  Who has an interest in the property? Check one  Debtor 1 only	Current value of the entire property? \$200,000.00  Describe the nature of you (such as fee simple, tens	current value of the portion you own? \$200,000.00  cour ownership interest ancy by the entireties, or
317 Libert Street address, Clarksville	if available, or other description  TN 37040-27	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  Investment property  Timeshare  Other  Who has an interest in the property? Check one  Debtor 1 only	Current value of the entire property? \$200,000.00  Describe the nature of you (such as fee simple, tens a life estate), if known.  Tenancy by the En	current value of the portion you own? \$200,000.00  cur ownership interest ancy by the entireties, or
317 Libert Street address,  Clarksville City	if available, or other description  TN 37040-27	Single-family home  Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$200,000.00  Describe the nature of yo (such as fee simple, tena a life estate), if known.  Tenancy by the En	current value of the portion you own? \$200,000.00  cur ownership interest ancy by the entireties, or
Clarksville City	if available, or other description  TN 37040-27	Single-family home  Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home  Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this iter	Current value of the entire property? \$200,000.00  Describe the nature of yo (such as fee simple, tena a life estate), if known.  Tenancy by the En	current value of the portion you own? \$200,000.00  cur ownership interest ancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt		ancaster, Michael Edward	& Lancaster, Adrianne Michelle Ca	ase number (if known)	
3. <b>Ca</b>	rs, vans,	trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
	Yes				
				Do not doduct accurac	Lalaima ar avamatiana Dut
3.1	Make:	Nissan	Who has an interest in the property? Check one	the amount of any sec	I claims or exemptions. Put ured claims on Schedule D:
	Model:	Murano AWD	☐ Debtor 1 only	Creditors Who Have C	Claims Secured by Property.
	Year:	2018 nate mileage: 3479	Debtor 2 only	Current value of the	Current value of the
		nate mileage: 34/9 ormation:	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Otherini	ormation.	☐ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$35,000.00	\$35,000.00
3.2	Make:	Nissan	Who has an interest in the property? Check one		I claims or exemptions. Put
0.2	Model:	Titan 2WD	Debtor 1 only		ured claims on Schedule D: Claims Secured by Property.
	Year:	2018	Debtor 2 only		
	Approxin	nate mileage: 3297	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	☐ At least one of the debtors and another	ontino proporty .	portion you own.
			Check if this is community property (see instructions)	\$45,000.00	\$45,000.00
.yc	Descri	ttached for Part 2. Write that nu	rn for all of your entries from Part 2, including any imber hereetems terest in any of the following items?		\$80,000.00  Current value of the portion you own?
E:			china, kitchenware  yer, tables, tv stands, couches, love seats,	beds.	Do not deduct secured claims or exemptions.
			household goods		\$6,200.00
E)	•	including cell phones, cameras, r	o, stereo, and digital equipment; computers, printers, s nedia players, games phones, 2 computers, printer, apple watch	scanners; music collection	s; electronic devices \$1,000.00
	llo etible e	af value			
<i>E</i> ;	(amples: I	collections, memorabilia, collectib	prints, or other artwork; books, pictures, or other art ob oles	ojects; stamp, coin, or base	eball card collections; other
٦	160. DE	JUIIJŪ			
Officia	l Form 10	06A/B	Schedule A/B: Property		page :

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	ebtor 1 ebtor 2	Lancaster, l	Michael	Edward & Lancaster,	Adrianne Michelle	Case number (if known)	
	Example	ent for sports are es: Sports, photo instruments			quipment; bicycles, pool ta	ables, golf clubs, skis; canoes and	d kayaks; carpentry tools; musical
	■ No □ Yes.	Describe					
	Firearm Examp		s, shotgur	ns, ammunition, and relate	d equipment		
	☐ Yes.	Describe					
11.	Clothes Examp		othes, furs	, leather coats, designer w	ear, shoes, accessories		
	Yes.	Describe					_
			Men's	and women's clothin	ng		\$300.00
	□ No É					oom jewelry, watches, gems, gold	
			Costu	me jewelry, wedding	set		\$400.00
	Examp. ☐ No	rm animals oles: Dogs, cats, Describe					***
			3 dog	<u>S</u>			\$0.00
	■ No	ner personal an		-	ready list, including any	health aids you did not list	
15			•	rour entries from Part 3, i	9 5	r pages you have attached for	\$7,900.00
Pa	rt 4: Des	scribe Your Finan	ıcial Asset	e			
				quitable interest in any o	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No		·	ur wallet, in your home, in a	•	hand when you file your petition	
	Examp			other financial accounts; c		es in credit unions, brokerage hot ach.	uses, and other similar
	□ No ■ Yes				Institution name:		
			474	Chacking Assert	Rank of America		\$220.00
			17.1.	Checking Account	Daile Of Afficerica		<del></del>
			17.2.	Savings Account	Bank of America		\$14.00
				-31go / 1000uill			

Official Form 106A/B Schedule A/B: Property

page 3

_		
	botor 1 botor 2  Lancaster, Michael Edward & Lancaster, Adrianne Michelle  Case number (if known)	
18.	Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts  No	
	Yes Institution or issuer name:	
19.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in a joint venture	n LLC, partnership, and
	■ No □ Yes. Give specific information about them	
	Name of entity: % of ownership:	
20.	Government and corporate bonds and other negotiable and non-negotiable instruments  Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.	
	■ No	
	Yes. Give specific information about them Issuer name:	
21.	Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plan  No	s
	Yes. List each account separately.  Type of account:  Institution name:	
22.	Security deposits and prepayments  Your share of all unused deposits you have made so that you may continue service or use from a company  Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or	others
	■ No □ Yes	
	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
23.	No	
	Yes Issuer name and description.	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ı.
	■ No  Yes  Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisa No	able for your benefit
	☐ Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property  Examples: Internet domain names, websites, proceeds from royalties and licensing agreements  No	
	☐ Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles  Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses  ■ No	
	☐ Yes. Give specific information about them	
M	oney or property owed to you?	Current value of the portion you own?

28. Tax refunds owed to you

■ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 4

claims or exemptions.

	ebtor 1 ebtor 2	Lancaster, Michael Edward & Lancaster, Adrianne Miche	Case number (if known)	
29.		support  les: Past due or lump sum alimony, spousal support, child support, main	stenance, divorce settlement, property	settlement
	_	Give specific information		
30.	Exam <sub>l</sub>	amounts someone owes you  oles: Unpaid wages, disability insurance payments, disability benefits, sick unpaid loans you made to someone else	pay, vacation pay, workers' compensat	ion, Social Security benefits;
	■ No □ Yes.	Give specific information		
31.		ts in insurance policies  oles: Health, disability, or life insurance; health savings account (HSA); cre-	dit, homeowner's, or renter's insurance	
	Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund
		VGLI	Wife	value: <b>\$0.00</b>
32.		erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance po	olicy, or are currently entitled to receive	property because someone has
	☐ Yes.	Give specific information		
33.	Examµ ■ No	against third parties, whether or not you have filed a lawsuit or mades: Accidents, employment disputes, insurance claims, or rights to sue	le a demand for payment	
34.	Other o	contingent and unliquidated claims of every nature, including counted Describe each claim	erclaims of the debtor and rights to s	set off claims
35.		ancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		he dollar value of all of your entries from Part 4, including any entrie	. • ,	\$234.00
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List a	ny real estate in Part 1.	
-	No. Go	own or have any legal or equitable interest in any business-related property? to Part 6. So to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or Hav ou own or have an interest in farmland, list it in Part 1.	e an Interest In.	
46.	■ No.	own or have any legal or equitable interest in any farm- or commerce Go to Part 7.  . Go to line 47.	cial fishing-related property?	
Pa	rt 7:	Describe All Property You Own or Have an Interest in That You Did Not Lis	ıt Above	

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1 Debtor 2	Lancaster, Michael Edward & Lancaster, Adrianne Michelle	Case number (if known)	
•	have other property of any kind you did not already list?  les: Season tickets, country club membership		

☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00

Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$200,000.00
56.	Part 2: Total vehicles, line 5		\$80,000.00	_	_
57.	Part 3: Total personal and household items, line 15		\$7,900.00		
58.	Part 4: Total financial assets, line 36		\$234.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$88,134.00	Copy personal property total	\$88,134.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$288,134.00

\$288,134.00

Official Form 106A/B Schedule A/B: Property page 6

■ No

	Fill in this	information to identif	y your case:		
De	ebtor 1	Michael Edward	Lancaster		
_		First Name	Middle Name	Last Name	-
1 -	ebtor 2 pouse if, filing)	First Name	Middle Name	Last Name	-
Un	nited States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF TENN	NESSEE, NASHVILLE DIVISION	_
1	ase number				☐ Check if this is an amended filing
O	fficial For	m 106C			
		<del></del>	perty You Clai	im as Exempt	4/19
propout kno For spe app fun to a	perty you listed of and attach to thi own). The each item of pecific dollar am- colicable statuto ads—may be un	on Schedule A/B: Prope s page as many copies roperty you claim as e ount as exempt. Alterr ry limit. Some exempt limited in dollar amou lar amount and the val	erty (Official Form 106A/B) as you of Part 2: Additional Page as necessary and a second page and a	ar source, list the property that you claid tessary. On the top of any additional paramount of the exemption you claim I fair market value of the property In aids, rights to receive certain ben	peing exempted up to the amount of any efits, and tax-exempt retirement lue under a law that limits the exemption
Pa	art 1: Identify	the Property You Cla	im as Exempt		
1.	Which set of	exemptions are you cl	aiming? Check one only, even i	f your spouse is filing with you.	
	You are clai	ming state and federal n	onbankruptcy exemptions. 11 L	J.S.C. § 522(b)(3)	
	☐ You are clai	ming federal exemptions	s. 11 U.S.C. § 522(b)(2)		
2.	For any prope	erty you list on Sched	ule A/B that you claim as exen	npt, fill in the information below.	
		n of the property and line hat lists this property	e on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	

**Debtor 1 Exemptions** TCA § 26-2-301 \$200,000.00 \$7,500.00

317 Liberty Bell Ln Clarksville TN, 37040-2740 100% of fair market value, up to Line from Schedule A/B: 1.1 any applicable statutory limit washer and dryer, tables, tv stands, TCA § 26-2-103 \$6,200.00 \$6,200.00 couches, love seats, beds, recliner, misc household goods 100% of fair market value, up to Line from Schedule A/B: 6.1 any applicable statutory limit 3 TV's, 2 cellsphones, 2 computers, TCA § 26-2-103 \$1,000.00 \$1,000.00 printer, apple watch Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Men's and women's clothing TCA § 26-2-104 \$300.00 \$300.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit

Official Form 106C

Schedule C: The Property You Claim as Exempt

\$400.00

page 1 of 3

TCA § 26-2-103

\$400.00

100% of fair market value, up to any applicable statutory limit

Costume jewelry, wedding set

Line from Schedule A/B: 12.1

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Bank of America Line from Schedule A/B 17.1	\$220.00	•	\$220.00	TCA § 26-2-103
				100% of fair market value, up to any applicable statutory limit	
	Bank of America Line from Schedule A/B 17.2	\$14.00		\$14.00	TCA § 26-2-103
	Zine nom estitudate filizi			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3  No			on or after the date of adjustment.)	
	Yes. Did you acquire the property covered  No  Yes	d by the exemption withir	า 1,21	5 days before you filed this case?	
	<b>□</b> 1€3				

Fill i	n this inform	nation to identify your	case:				
Debt	tor 1						
		First Name	Middle Name	I	ast Name		
Debt		Adrianne Michel	Ile Lancaster  Middle Name		aat Nama		
(Spou	se if, filing)	First Name	Middle Name	ı	ast Name		
Unite	ed States Bar	nkruptcy Court for the:	MIDDLE DISTRICT (	OF TENNES	SEE, NASHVILLE DIVISIO	N	
Case (if kno	e number						☐ Check if this is an amended filing
Off	icial Fo	rm 106C					
Sc	hedule	e C: The Pr	operty You	Claim	as Exempt		4/19
prope	erty you listed on the attach to the	on Schedule A/B: Prop	erty (Official Form 106A/E	3) as your so	irce, list the property that yo	ou claim as	olying correct information. Using the exempt. If more space is needed, fill write your name and case number (if
speci	ific dollar am	ount as exempt. Alter	natively, you may clain	n the full fair	market value of the prop	erty being	e way of doing so is to state a exempted up to the amount of any and tax-exempt retirement
speci appli funds to a p appli Part	ific dollar am cable statuto s—may be un particular dol cable statuto	nount as exempt. Alter ory limit. Some exemp nlimited in dollar amo llar amount and the va ory amount. y the Property You Cl	rnatively, you may clain tions—such as those fo unt. However, if you cla alue of the property is d aim as Exempt	n the full fair or health aid aim an exem letermined t	market value of the props, rights to receive certain otion of 100% of fair marks exceed that amount, yo	perty being in benefits, ket value u	
speci appli funds to a p appli Part	ific dollar am cable statuto s—may be un particular dol cable statuto 1: Identify Which set of	nount as exempt. Alter by limit. Some exemptinited in dollar amoult and the value amount.  The property You Clear exemptions are you compared to the property of the property	rnatively, you may clain tions—such as those fo unt. However, if you cla alue of the property is d aim as Exempt	n the full fair or health aid im an exem letermined to y, even if you	market value of the props, rights to receive certaintion of 100% of fair marks exceed that amount, your spouse is filing with you.	perty being in benefits, ket value u	exempted up to the amount of any and tax-exempt retirement nder a law that limits the exemption
speci appli funds to a p appli Part	ific dollar am cable statuto s—may be un particular dol cable statuto  1: Identify Which set of	nount as exempt. Alter by limit. Some exemption in dollar amoult and the value amount.  The property You Clear exemptions are you committed the property of the property amount.	rnatively, you may clain tions—such as those fount. However, if you clain alue of the property is daim as Exempt	n the full fair or health aid aim an exem letermined to y, even if you as. 11 U.S.C	market value of the props, rights to receive certaintion of 100% of fair marks exceed that amount, your spouse is filing with you.	perty being in benefits, ket value u	exempted up to the amount of any and tax-exempt retirement nder a law that limits the exemption
speciappli funds to a p appli Part	ific dollar am cable statuto s—may be un particular dol cable statuto  1: Identify Which set of  You are cla	nount as exempt. Alter bry limit. Some exemp nlimited in dollar amo llar amount and the va- bry amount.  The property You Cland exemptions are you comply the properties and federal siming state and federal exemption.	rnatively, you may claim tions—such as those fount. However, if you claim as Exempt  claiming? Check one only nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2)	n the full fair or health aid aim an exem letermined to y, even if you ns. 11 U.S.C	market value of the props, rights to receive certaintion of 100% of fair marks exceed that amount, your spouse is filing with you.	perty being n benefits, ket value u ur exempti	exempted up to the amount of any and tax-exempt retirement nder a law that limits the exemption
speciapplia funds to a part 1. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ific dollar am cable statuto s—may be un particular dol cable statuto  1: Identify Which set of  You are cla  You are cla  For any properied description	nount as exempt. Alter bry limit. Some exemp nlimited in dollar amo llar amount and the va- bry amount.  The property You Cland exemptions are you comply the properties and federal siming state and federal exemption.	rnatively, you may claim tions—such as those fount. However, if you claim as Exempt  claim as Exempt  claiming? Check one only nonbankruptcy exemption  ns. 11 U.S.C. § 522(b)(2)  dule A/B that you claim	n the full fair or health aid aim an exem letermined to y, even if you as. 11 U.S.C ) as exempt, 1	market value of the props, rights to receive certaintion of 100% of fair marks exceed that amount, your spouse is filing with you.  § 522(b)(3)	perty being in benefits, ket value u uur exempti	exempted up to the amount of any and tax-exempt retirement nder a law that limits the exemption
speciapplia funds to a part 1. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ific dollar am cable statuto s—may be un particular dol cable statuto  1: Identify Which set of  You are cla  You are cla  For any properied description	nount as exempt. Alter bry limit. Some exempt ilmited in dollar amoultar amount and the va- bry amount.  The property You Clause with the value of the property You Clause with the property and line of the property and lin	rnatively, you may claim tions—such as those fount. However, if you claim as Exempt  claiming? Check one only nonbankruptcy exemptions. 11 U.S.C. § 522(b)(2) dule A/B that you claim no Current value	n the full fair or health aid aim an exem letermined to y, even if you as. 11 U.S.C ) as exempt, 1 of the Am yn	market value of the props, rights to receive certaintion of 100% of fair marks because that amount, your spouse is filing with you.  S \$ 522(b)(3)	perty being in benefits, ket value u uur exempti ever	gexempted up to the amount of any , and tax-exempt retirement nder a law that limits the exemption ion would be limited to the
speciappliifunds to a pappliifunds to a pappliifunds 1. \	ific dollar am cable statuto s—may be un particular dol cable statuto  1: Identify Which set of  You are cla  You are cla  For any properied description	nount as exempt. Alter bry limit. Some exemption in dollar amoult and the value amount.  The property You CI exemptions are you can be state and federal aiming federal exemption extry you list on Scheet on of the property and list that lists this property	rnatively, you may claim tions—such as those fount. However, if you claim as Exempt  claim as Exempt  claiming? Check one only nonbankruptcy exemption as. 11 U.S.C. § 522(b)(2)  claiming Current value portion you over the contract of the	n the full fair or health aid aim an exem letermined to y, even if you as. 11 U.S.C ) as exempt, 1 of the Am yn	market value of the props, rights to receive certaintion of 100% of fair marks because that amount, your spouse is filing with you.  S \$ 522(b)(3)  ill in the information belowed the exemption you count of the	perty being in benefits, ket value u uur exempti ever	gexempted up to the amount of any , and tax-exempt retirement nder a law that limits the exemption ion would be limited to the
speciappliifunds to a properties  Part  1. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ific dollar am cable statuto s—may be unarticular dol cable statuto  1: Identify Which set of  You are cla  You are cla  For any prop Brief description Schedule A/B to the case of the ca	nount as exempt. Alter bry limit. Some exemption in dollar amoult and the value amount.  If the Property You Clease are you can be seen that it is a seen to the property and limit that lists this property are listed to the property and limit that lists this property are listed to the property and limit that lists this property are listed to the property and list that lists this property are listed to the property and list that lists this property are listed to the property and list that lists this property are listed to the property are listed to the property are listed to the property and list that lists this property are listed to the property are listed to the property and listed the property are listed to the property and listed the property are listed to the property are list	rnatively, you may claim tions—such as those fount. However, if you claim as Exempt  claim as Exempt  claiming? Check one only nonbankruptcy exemption as. 11 U.S.C. § 522(b)(2)  claiming Current value portion you over the contract of the	n the full fair or health aid aim an exem letermined to y, even if you as. 11 U.S.C ) as exempt, 1 of the Am yn	market value of the props, rights to receive certaintion of 100% of fair marks because that amount, your spouse is filing with you.  S \$ 522(b)(3)  ill in the information belowed the exemption you count of the	perty being in benefits, ket value u uur exempti ever	gexempted up to the amount of any , and tax-exempt retirement nder a law that limits the exemption ion would be limited to the
speciappliifunds to a properties  Part  1. \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ific dollar am cable statuto s—may be uporticular dol cable statuto 1: Identify Which set of You are claded You	nount as exempt. Alter bry limit. Some exemption in dollar amoult and the value amount.  If the Property You Clease are you can be seen that it is a seen to the property and limit that lists this property are listed to the property and limit that lists this property are listed to the property and limit that lists this property are listed to the property and list that lists this property are listed to the property and list that lists this property are listed to the property and list that lists this property are listed to the property are listed to the property are listed to the property and list that lists this property are listed to the property are listed to the property and listed the property are listed to the property and listed the property are listed to the property are list	rnatively, you may claim tions—such as those fount. However, if you claim as Exempt  claim as Exempt  claiming? Check one only nonbankruptcy exemption as. 11 U.S.C. § 522(b)(2)  claiming Current value portion you over the contract of the	n the full fair or health aid aim an exem letermined to  y, even if you  ns. 11 U.S.C  )  as exempt, 1  of the Am  yn  from Che	market value of the props, rights to receive certaintion of 100% of fair marks because that amount, your spouse is filing with you.  S \$ 522(b)(3)  ill in the information belowed the exemption you count of the	perty being n benefits, set value usur exemption.	gexempted up to the amount of any , and tax-exempt retirement nder a law that limits the exemption ion would be limited to the

	Fill in this	information to iden	tify your case:			
Deb	tor 1	Michael Edward	d Lancaster			
		First Name	Middle Name Last Name		` }	
	tor 2	Adrianne Miche				
(Spot	ise if, filing)	First Name	Middle Name Last Name			
Unit	ed States Bank	ruptcy Court for the:	MIDDLE DISTRICT OF TENNESSEE, NASH	IVILLE DIVISION		
Case (if kno	e number					Check if this is an mended filing
Offi	cial Form	106D				
Sc	hedule [	): Creditors	Who Have Claims Secure	d by Propert	У	12/15
neede know 1. Do	ed, copy the Add n). any creditors ha D No. Check th	ditional Page, fill it out	is form to the court with your other schedules. You	he top of any additional	pages, write your r	
Part	1 List All	Secured Claims				
2. Li	st all secured cla	aims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for ea	ach claim. If mor	e than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Amount of claim  Do not deduct the value of collateral.	Value of collater that supports thi claim	
2.1	Loancare S Center	Servicing	Describe the property that secures the claim:	\$197,020.00	\$200,000	.00 \$0.00
	Creditor's Name  3637 Senta	ra Way Ste	317 Liberty Bell Ln, Clarksville, TN 37040-2740			
	303 Virginia Be 23452-4262	ach, VA	As of the date you file, the claim is: Check all that apply.  ☐ Contingent			
		ity, State & Zip Code	☐ Unliquidated			
			Disputed			
Who	owes the debt	? Check one.	Nature of lien. Check all that apply.			
	ebtor 1 only		☐ An agreement you made (such as mortgage or sec	cured		
	ebtor 2 only		car loan)			
	ebtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
ПА	t least one of the	debtors and another	☐ Judgment lien from a lawsuit			
	heck if this clair		Other (including a right to offset)			

Date debt was incurred

Last 4 digits of account number

Debte	or 1	Michael Edward Lancas	ster	Case number (if known)		
		First Name Middle N				
Debte	_	Adrianne Michelle Lanc				
		First Name Middle N	lame Last Name			
2.2	Niss	san Motor		4	• • • • • • • • • • • • • • • • • • • •	
2.2		eptance	Describe the property that secures the claim:	\$47,273.00	\$45,000.00	\$2,273.00
	Credito	or's Name	2018 Nissan Titan 2WD			
			As of the date you file, the claim is: Check all that			
		Box 660366	apply.			
_	Dalla	as, TX 75266-0366	☐ Contingent			
	Numbe	er, Street, City, State & Zip Code	☐ Unliquidated			
			☐ Disputed			
Who	owes	the debt? Check one.	Nature of lien. Check all that apply.			
□ De	ebtor 1	only	☐ An agreement you made (such as mortgage or s	ecured		
□ De	ebtor 2	only	car loan)			
■ De	htor 1	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_		one of the debtors and another	☐ Judgment lien from a lawsuit			
		f this claim relates to a	☐ Other (including a right to offset)			
		inity debt	Other (including a right to offset)			
		•				
Date	debt w	vas incurred	Last 4 digits of account number			
2.3	_	san Motor	Describe the property that secures the claim:	\$36,911.00	\$35,000.00	\$1,911.00
		eptance or's Name	2018 Nissan Murano AWD			<b>41,511165</b>
	O. Gaile	5. 6	2016 NISSAN WUTANO AWD			
	PO I	Box 660366	As of the date you file, the claim is: Check all that			
	_	as, TX 75266-0366	apply. ☐ Contingent			
-		er, Street, City, State & Zip Code				
	Nullibe	er, Street, City, State & Zip Code	Unliquidated			
Who	OWAS	the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_	ebtor 1		_	acurad		
_		•	☐ An agreement you made (such as mortgage or s car loan)	ecured		
_	ebtor 2	•	<u> </u>			
		and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_		one of the debtors and another	Judgment lien from a lawsuit			
		f this claim relates to a	Other (including a right to offset)			
C	ommu	inity debt				
Date	debt w	vas incurred	Last 4 digits of account number			
2.4	Prog	gressive Leasing	Describe the property that secures the claim:	\$1,600.00	\$6,200.00	\$0.00
	Credito	or's Name	washer and dryer, tables, tv stands,			
			couches, love seats, beds, recliner,			
			misc household goods			
	5651	I W Talavi Blvd	As of the date you file, the claim is: Check all that			
		ndale, AZ 85306-1884	apply. □ Contingent			
-		er, Street, City, State & Zip Code	☐ Unliquidated			
	INGILIDO	or, offeet, only, otate & Zip code	☐ Disputed			
Who	owes	the debt? Check one.	Nature of lien. Check all that apply.			
_	ebtor 1		☐ An agreement you made (such as mortgage or s	ecured		
_		•	An agreement you made (such as mortgage or s car loan)	Couled		
_	ebtor 2	•				
		and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
		one of the debtors and another	☐ Judgment lien from a lawsuit			
		f this claim relates to a	Other (including a right to offset)			
C	ommu	inity debt				
Date	debt w	vas incurred	Last 4 digits of account number			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1	Michael Edv	vard Lancaster		Case number (f known)	
	First Name	Middle Name	Last Name		
Debtor 2	Adrianne Mi	chelle Lancaster			
	First Name	Middle Name	Last Name		
Add the de	ollar value of you	r entries in Column A on this	page. Write that number here:	\$282,804.00	
	ne last page of yo number here:	ur form, add the dollar value	totals from all pages.	\$282,804.00	

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this	s information to identify you	ır case:	
Debtor 1	Michael Edward	ancaster	
	First Name	Middle Name Last Name	)
Debtor 2 (Spouse if, filing)	Adrianne Michell	e Lancaster Middle Name Last Name	
(Spouse II, IIIIIIg)	i iist Name		
United State	s Bankruptcy Court for the:	MIDDLE DISTRICT OF TENNESSEE, NASHVILLE DIVISION	
Case numbe	er		
(if known)			☐ Check if this is an
			amended filing
Official E	orm 106E/F		
		ho Have Unsecured Claims	12/15
		Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NO	
he Continuati ase number (	on Page to this page. If you ha	operty. If more space is needed, copy the Part you need, fill it out, number we no information to report in a Part, do not file that Part. On the top of any secured Claims	
	reditors have priority unsecure		
■ No. Go	o to Part 2.		
☐ Yes.			
Part 2: Li	ist All of Your NONPRIORIT	Y Unsecured Claims	
3. Do any cr	reditors have nonpriority unsec	cured claims against you?	
☐ No. Yo	ou have nothing to report in this p	art. Submit this form to the court with your other schedules.	
Yes.			
unsecured	d claim, list the creditor separately	aims in the alphabetical order of the creditor who holds each claim. If a cre of for each claim. For each claim listed, identify what type of claim it is. Do not list st the other creditors in Part 3.If you have more than three nonpriority unsecured	claims already included in Part 1. If more
			Total claim
4.1 <b>Bes</b>	st Buy/CBNA	Last 4 digits of account number 7778	\$4,406.00
Nonp	priority Creditor's Name	When was the debt incurred?	
РО	Box 6497	when was the dept incurred:	
Sio	ux Falls, SD 57117		
	ber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
_	incurred the debt? Check one.	_	
	ebtor 1 only	Contingent	
	ebtor 2 only	Unliquidated	
	ebtor 1 and Debtor 2 only	Disputed	
_	t least one of the debtors and and		
□ C debt	heck if this claim is for a comi	nunity Student loans  Obligations arising out of a separation agreement or divorce	a that you did not
	e claim subject to offset?	report as priority claims	s mai you did not
■ N	lo	Debts to pension or profit-sharing plans, and other similar d	ebts
ΠY		Other. Specify	
		p,	

0	1	0004.00
Capital One Nonpriority Creditor's Name	Last 4 digits of account number 1600	\$331.00
•	When was the debt incurred?	
PO Box 30281 Salt Lake City, UT 84130-0281		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
Capitol One Bank USA	Last 4 digits of account number 5047	\$3,166.00
Nonpriority Creditor's Name	When we the debt incorred?	
PO Box 30281	When was the debt incurred?	
Salt Lake City, UT 84130-0281		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
■ No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes		
⊔ Yes	Other. Specify	
Capitol One Services	Last 4 digits of account number 6444	unknowr
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 70886		
Charlotte, NC 28272-0886		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	П	
Debtor 2 only	☐ Contingent	
Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

Cash America	Last 4 digits of account number	\$366.00
Nonpriority Creditor's Name	When was the debt incurred?	
659 Providence Blvd Ste A		
Clarksville, TN 37042-7740	As at the date way file the plaint in Obsal all that and	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	`	
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
CCB/DNTLFRST	Last 4 digits of account number 9777	\$1,868.00
Nonpriority Creditor's Name		ψ1,000.00
DO D. 100100	When was the debt incurred?	
PO Box 182120 Columbus, OH 43218-2120		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes		
⊔ Yes	Other. Specify	
Comcast	Last 4 digits of account number	\$350.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 105257		
Atlanta, GA 30348		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

0 " 0 D I		
Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$293.0
	When was the debt incurred?	
Po Box 98872		
Las Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Eagle Finance	Last 4 digits of account number	\$1,000.0
Nonpriority Creditor's Name	When was the debt incurred?	
7791 Dixie Hwy Ste B Florence, KY 41042-2602	when was the dept incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	- · · · · · · · · · · · · · · · · · · ·	
Yes	Other. Specify	
FRPG , PLLC Nonpriority Creditor's Name	Last 4 digits of account number 6161	\$55,682.6
Nonphonty Gredior's Name	When was the debt incurred?	
PO Box 440151		
Nashville, TN 37244-0151  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	Other. Specify	

FRPG LLC   Norprointy Creditor's Name   When was the debt incurred?   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   As of the date you file, the claim:   Contingent   Uniquidated   Disputed   Upped NoNPRIORITY unsecured claim:   Student loans   Debts or a positive claims applies as priority claims   Debts or position or profit-sharing plane, and other similar debts   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   As of the date you file, the claim is: Check all that apply   When was the debt incurred?   Debts or a positive claims   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that apply   Debts or a positive claim is: Check all that ap	
Nonpriority Creditor's Name   PO Box 440151   Nashville, This 37244-0151   Nashville, This 37244-0151   Nashville, This 37244-0151   Nashville, This 37244-0151   Number Street City State Zip Code   Who incurred the debt? Check one.   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 and Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 8 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 2 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debto	\$508.0
PO Box 440151   Nashville, TN 37244-0151   Nashville, TN 37240-08560   Number Street City State Zip Code   Number Street City State Zip Code   Nashville, TN 37240-08560   Number Street City State Zip Code   Nashville, TN 37240-08560   Number Street City State Zip Code   Nashville, TN 37240-08560   Number Street City State Zip Code   Nashville, TN 37240-08560   Number Street City State Zip Code   Nashville, TN 37240-08560   Number Street City State Zip Code   Number Street City State	
Nashville, TN 37244-0151	
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 1 only Debtor 1 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1	
Debtor 1 only	
Debtor 2 only	
■ Debtor 1 and Debtor 2 only	
At least one of the debtors and another   Check if this claim is for a community debt is the claim subject to offset?   Student loans   Check if this claim is for a community debt is the claim subject to offset?   Debts to pension or profit-sharing plans, and other similar debts   Check one.   Check if this claim is for a community debt is the claim subject to offset?   Check one.   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim subject to offset?   Check if this claim is for a community debt is the claim is check all that apply   Check offset is check all that apply   Check offset is check all that apply   Contingent   C	
Check if this claim is for a community debt   Student loans   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Other. Specify   Other. Specify   Other. Specify      C Stsyems Collections   Last 4 digits of account number   7280   \$ Nonpriority Creditor's Name   When was the debt incurred?	
debt is the claim subject to offset?  ■ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify □ Other	
Steel claim subject to offset?   Contingent   Contingen	
C Stsyems Collections	
C Stsyems Collections	
Nonpriority Creditor's Name  PO Box 64378 Saint Paul, MN 55164-0378 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 6 the debtors and another Check if this claim is for a community debt she claim subject to offset? No Debtor 1 only Student loans Debtor 2 only Debtor 3 community Debtor 3 community Debtor 4 tleast one of the debtors and another Debtor 5 community Debtor 6 community Debtor 7 community Debtor 8 community Debtor 9 commu	
Nonpriority Creditor's Name  PO Box 64378 Saint Paul, MN 55164-0378 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 6 the debtors and another Check if this claim is for a community debt she claim subject to offset? No Debtor 1 only Student loans Debtor 2 only Debtor 3 community Debtor 3 community Debtor 4 tleast one of the debtors and another Debtor 5 community Debtor 6 community Debtor 7 community Debtor 8 community Debtor 9 commu	51,096.0
PO Box 64378 Saint Paul, MN 55164-0378 Number Street City State Zip Code Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Check if this claim is for a community debt □ No □ Yes □ Other. Specify □ Other. Specify □ Other. Specify □ Other. Specify □ Who incurred the debt? Check one. □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify □ Other. Specify □ Who was the debt incurred?  As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Unliquidated □ Unliquidated	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Saint Paul, MN 55164-0378         Number Street City State Zip Code       As of the date you file, the claim is: Check all that apply         Who incurred the debt? Check one.       □ Contingent         □ Debtor 1 only       □ Contingent         □ Debtor 2 only       □ Unliquidated         □ Debtor 1 and Debtor 2 only       □ Disputed         □ Type of NONPRIORITY unsecured claim:       □ Student loans         □ Check if this claim is for a community debt       □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims         □ No       □ Debts to pension or profit-sharing plans, and other similar debts         □ Yes       □ Other. Specify         Inversion Ultrasound       Last 4 digits of account number         Nonpriority Creditor's Name       When was the debt incurred?         2320 Wilma Rudolph Blvd Clarksville, TN 37040-8960       As of the date you file, the claim is: Check all that apply         Who incurred the debt? Check one.       □ Debtor 2 only     As of the date you file, the claim is: Check all that apply	
Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 fthe debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts 1 per solution of the debtors and another Others I per solution of the debtors and another Student loans Debts to pension or profit-sharing plans, and other similar debts Other. Specify  Inversion Ultrasound Nonpriority Creditor's Name When was the debt incurred?  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Debtor 1 only Debtor 2 only  Debtor 2 only  As of the date you file, the claim is: Check all that apply  As of the date you file, the claim is: Check all that apply  Debtor 2 only  Debtor 2 only	
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	
Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify  Inversion Ultrasound Nonpriority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 2 only Contingent Unliquidated  Disputed Disputed Type of NONPRIORITY unsecured claim: Type of NONPRIORITY unsecured claim: Debtor 3 a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Check all that apply  As of the date you file, the claim is: Check all that apply Debtor 2 only Unliquidated	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify □ Other. Specif	
Type of NONPRIORITY unsecured claim:  Check if this claim is for a community debt Is the claim subject to offset?  No  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Inversion Ultrasound  Nonpriority Creditor's Name  When was the debt incurred?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Other. Specify  As of the date you file, the claim is:  Under the claim is claim in the claim is	
☐ Check if this claim is for a community debt ☐ Student loans   ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims   ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts   ☐ Yes ☐ Other. Specify    Inversion Ultrasound  Nonpriority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is: Check all that apply   When was the debt? Check one. ☐ Debtor 1 only   ☐ Debtor 2 only ☐ Unliquidated	
debt   Obligations arising out of a separation agreement or divorce that you did not report as priority claims   Debts to pension or profit-sharing plans, and other similar debts   Other. Specify   Other. Specify   Other. Specify   Other. Specify   Other. Specify   Other was the debt incurred?   Other was the debt incurred?   Other was the debt incurred?   Other was the debt incurred the debt? Check one.   Other was the debt you file, the claim is: Check all that apply   Other was the debt? Other only   Other was the debt incurred   Other was the debt? Other only   Other was the debt you file, the claim is: Check all that apply   Other was the debt? Other only   Other was the debt? Other only   Other was the debt you file, the claim is: Other was the debt? Other was the debt? Other was the debt you file, the claim is: Other was the debt apply   Other was the debt? Other was the debt you file, the claim is: Other was the debt apply   Other was the debt you file, the claim is: Other was the debt apply   Other was the debt you file, the claim is: Other was the debt apply   Other was the debt you file, the claim is: Other was the debt apply   Other was the debt you file, the claim is: Other was the debt apply   Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file, the claim is: Other was the debt you file you fil	
Inversion Ultrasound  Nonpriority Creditor's Name    Nonpriority Creditor's Name   Clarksville, TN 37040-8960     Number Street City State Zip Code   Debtor 1 only   Debtor 2 only   Unliquidated     Contingent	
□ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify □ Other. Sp	
Nonpriority Creditor's Name   When was the debt incurred?	
Inversion Ultrasound  Nonpriority Creditor's Name  When was the debt incurred?  2320 Wilma Rudolph Blvd Clarksville, TN 37040-8960  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated	
Nonpriority Creditor's Name  2320 Wilma Rudolph Blvd Clarksville, TN 37040-8960  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated	
When was the debt incurred?  2320 Wilma Rudolph Blvd Clarksville, TN 37040-8960  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Unliquidated	\$25.0
Clarksville, TN 37040-8960  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Unliquidated Unliquidated	
Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  Unliquidated	
☐ Debtor 1 only ☐ Contingent ☐ Debtor 2 only ☐ Unliquidated	
Debtor 2 only Unliquidated Unliquidated	
- Chiliquidated	
■ Debtor 1 and Debtor 2 only □ Disputed	
- Disputed	
At least one of the debtors and another  Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt	
Is the claim subject to offset?  report as priority claims  □ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes □ Other. Specify	

		_
Kentucky Higher Education  Nonpriority Creditor's Name	Last 4 digits of account number 8860	\$6,054.00
Nonpholity Greator's Name	When was the debt incurred?	
PO Box 24328		
Louisville, KY 40335-0328  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	ne or and actor year may and oranne or or or or an area approp	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Kentucky Higher Education	Last 4 digits of account number 8861	\$4,680.00
Nonpriority Creditor's Name		ψ 1,000100
DO D 04000	When was the debt incurred?	
PO Box 24328 Louisville, KY 40335-0328		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
	· · · ·	
Kentucky Higher Education	Last 4 digits of account number	\$10,698.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 24328		
Louisville, KY 40335-0328	- A Market Company (1) 11 - 12 - 13 - 14 - 15 - 15 - 15 - 15 - 15 - 15 - 15	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	

Kentucky Utilities	Last 4 digits of account number	\$85.6
Nonpriority Creditor's Name	When was the debt incurred?	
380 Airport Rd	when was the debt incurred?	
Greenville, KY 42345-1780		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
LG & E	Last 4 digits of account number	\$333.6
Nonpriority Creditor's Name		<del></del>
000 W D I	When was the debt incurred?	
820 W Broadway Louisville, KY 40202-2218		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Medicredit Corp.	Last 4 digits of account number 0799	\$250.0
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 1629	Their was the dest incurred.	
Maryland Heights, MO 63043-0629		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
$\square$ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	

	Last 4 digits of account number 0212	¢ace o
Montgomery COunty EM Nonpriority Creditor's Name	Last 4 digits of account number 0212	\$265.0
	When was the debt incurred?	
601 Dunlop Ln Clarksville, TN 37040-5015		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
One Main Financial	Last 4 digits of account number 4502	\$6,164.0
Nonpriority Creditor's Name		ψ0,104.0
	When was the debt incurred?	
PO Box 1010 Evansville, IN 47706-1010		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Pamela Pennington, Ph D.	Last 4 digits of account number	\$40.0
Nonpriority Creditor's Name	When was the debt incurred?	
1854 Memorial Dr		
Clarksville, TN 37043-4603		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
Check if this claim is for a community	_	
debt	Obligations arising out of a separation agreement or divorce that you did not	
	<ul> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>	

Davi Dal Osasili	Leat A direct of account number 7000	6047.0
Pay Pal Credit Nonpriority Creditor's Name	Last 4 digits of account number	\$317.6
	When was the debt incurred?	
PO Box 71202 Charlotte, NC 28272-1202		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Pay Pal Credit	Last 4 digits of account number 0517	\$1,153.7
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 960006	when was the debt incurred?	
Orlando, FL 32896-0006		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
uebt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
SNAP	Last 4 digits of account number	\$1,289.8
Nonpriority Creditor's Name	When was the debt incurred?	-
1497 E Baseline Rd Ste 4-109	when was the debt incurred?	
Gilbert, AZ 85233-1294 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	To of the date you me, the stant to. Oncour an anatappy	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?  ■ No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ N-	Littlents to pension or protit-sharing plans, and other similar debts	

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Tri-Star Centennial Nonpriority Creditor's Name	Last 4 digits of account number 6012	\$250.0				
Nonpriority Creditor's Name	When was the debt incurred?					
PO Box 290429						
Nashville, TN 37229-0429 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
□ Yes	_					
Li les	Other. Specify					
US Dept of Ed/GL	Last 4 digits of account number 1374	\$9,557.0				
Nonpriority Creditor's Name		•				
2401 International Ln	When was the debt incurred?					
Madison, WI 53704-3121						
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
No	□ Debts to pension or profit-sharing plans, and other similar debts					
■ No						
<b>—</b> 163	Other. Specify					
US Dept. of Ed/GL	Last 4 digits of account number 1379	\$56,431.0				
Nonpriority Creditor's Name	When was the debt incurred?					
2401 International Ln	when was the debt incurred?					
Madison, WI 53704-3121						
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community	Student loans					
	Obligations arising out of a separation agreement or divorce that you did not					
debt						
debt Is the claim subject to offset? ■ No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts					

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HCAA Fod Covings Book	Last 4 digits of account number 2294	\$6,974.0
USAA Fed. Savings Bank Nonpriority Creditor's Name		<b>\$</b> 0,974.
	When was the debt incurred?	
PO Box 47504 San Antonio, TX 78265-7504		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
USAA Fed. Savings Bank	Last 4 digits of account number 4789	\$1,070.
Nonpriority Creditor's Name	When we the debt in correct?	
9800 Fredericksburg Rd	When was the debt incurred?	
San Antonio, TX 78288-0001		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	
163	— Otter. Specify	
USAA Savings Bank Nonpriority Creditor's Name	Last 4 digits of account number 2402	\$440.
Nonpholity Creditor's Name	When was the debt incurred?	
10750 McDermott Fwy		
San Antonio, TX 78288-0002	As of the date were file the plaint in Observal All the teach	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	□ continues	
■ Debtor 2 only	☐ Contingent	
_	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

Official Form 106 E/F

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Other. Specify

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

☐ Yes

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Tatal Olaim
	6f.	Student loans	6f.	Total Claim
Total claims	OI.	Student loans	OI.	\$ 0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
monn rant 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 175,180.59
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 175,180.59

Fill in th	is information to identi	y your case:					
Debtor 1	ebtor 1 Michael Edward Lancaster						
	First Name	Middle Name	Last Name				
Debtor 2	Adrianne Michell	e Lancaster					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE, NASHVILLE DIVI	SION			
Case number _							
(if known)							

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	ADT	Security system
2.2	Directv	Satellite
2.3	Verizon	Cellphones, watch

-	ill in this information to identif				
Debtor 1	ill in this information to identif				
Debtor i	Michael Edward   First Name	Middle Name	Last Name		
Debtor 2	Adrianne Michell		Leat News		
(Spouse if, fil	·	Middle Name	Last Name	1.5.50,40,01	
United Sta	ates Bankruptcy Court for the:	MIDDLE DISTRICT OF	TENNESSEE, NASHVIL	LE DIVISION	
Case num (if known)	nber				☐ Check if this is an amended filing
	al Form 106H dule H: Your Code	ebtors			12/15
are filing t and numb	ogether, both are equally resp	onsible for supplying c the left. Attach the Addi	orrect information. If mo	re space is needed, co	e as possible. If two married people py the Additional Page, fill it out, litional Pages, write your name and
1. Do	you have any codebtors? (If y	ou are filing a joint case, o	do not list either spouse as	a codebtor.	
■ No					
	thin the last 8 years, have you ornia, Idaho, Louisiana, Nevada,				states and territories include Arizona,
	o. Go to line 3. s. Did your spouse, former spous	se, or legal equivalent live	with you at the time?		
line 2 106D)	again as a codebtor only if th	at person is a guaranto	r or cosigner. Make sure	you have listed the cr	with you. List the person shown in editor on Schedule D (Official Form e E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cree Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	e
	Name			☐ Schedule E/F, li	
				☐ Schedule G, line	e
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	<u> </u>
	Name			□ Schedule E/F, li	ne
				☐ Schedule G, line	e
	Number Street City	State	ZIP Code	_	
	Oity	Glate	ZIF COUR		

Schedule H: Your Codebtors

Fill	in this information to	o identify your ca	se:										
De	btor 1	Michael Edw	ard Lancaster				_						
1 1	btor 2 ouse, if filing)	Adrianne Mic	chelle Lancaster				_						
Un	ited States Bankrup	tcy Court for the:	MIDDLE DISTRICT C	F TENNESS	SEE, NASHV	/ILLE	_						
(If k	se number	4001		-						ed filing ent showi	ing postpetit owing date:	ion chapter	13
_	fficial Form							7	MM / DD/	YYYY			
	chedule I:		ome ble. If two married peop										/15
spo atta	ouse. If you are sep ich a separate shee	arated and your	re married and not filin spouse is not filing wit n the top of any additio	h you, do no	ot include ir	form	ation	about	your spo	use. If mo	ore space is	s needed,	
1.	Fill in your emploinformation.	oyment		Debtor 1					Debtor	2 or non-	-filing spou	se	
	If you have more to		Employment status	☐ Employ	☐ Employed			☐ Employed					
	attach a separate information about employers.		Employment status	■ Not em	ployed				■ Not e	employed			
			Occupation										_
	Include part-time, self-employed wor		Employer's name										
	Occupation may i homemaker, if it a		Employer's address										
			How long employed to	nere?					_				
Pa	rt 2: Give De	tails About Mont	thly Income										
	imate monthly inco		te you file this form. If y	ou have nothi	ing to report	for an	y line	, write \$	0 in the sp	ace. Inclu	ude your nor	n-filing spou	se
	ou or your non-filing s ce, attach a separate		e than one employer, com	oine the inforr	mation for all	empl	oyers	for that	person or	the lines	below. If yo	u need more	Э
								For De	btor 1		ebtor 2 or filing spous	6 <b>e</b>	
2.			, and commissions (be liculate what the monthly			2.	\$		0.00	. \$	0.	.00	
3.	Estimate and list	monthly overtir	me pay.			3.	+\$		0.00	. +\$ _	0.	.00_	
4.	Calculate gross	Income. Add line	e 2 + line 3.			4.	\$		0.00	\$	0.00	,	

	otor 1 Lancaster, Michael Edward & Lancaster, Adrianne Michel	lle	Case	number (if known)			
	Compliant Albana	4		Debtor 1	For Debtor	spouse	
	Copy line 4 here	4.	\$_	0.00	\$	0.00	-
5.	List all payroll deductions:						
	<ul> <li>5a. Tax, Medicare, and Social Security deductions</li> <li>5b. Mandatory contributions for retirement plans</li> <li>5c. Voluntary contributions for retirement plans</li> <li>5d. Required repayments of retirement fund loans</li> <li>5e. Insurance</li> <li>5f. Domestic support obligations</li> <li>5g. Union dues</li> </ul>	5a. 5b. 5c. 5d. 5e. 5f.	\$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00	\$ 	0.00 0.00 0.00 0.00 0.00	- - - -
	<ul><li>5g. Union dues</li><li>5h. Other deductions. Specify:</li></ul>	5g. 5h.+	· · · ·	0.00	+ \$	0.00	_
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	-
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	-
8.	List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a deper regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assist that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify: VA Disability Disabilty	e 8c. 8d. 8e.	\$ _ \$ _ \$ _ \$ _ \$ _ \$ _ \$ _ \$ _ \$ _ \$ _	0.00 0.00 0.00 1,033.10 0.00 0.00 1,767.69 0.00	\$ \$ + \$	0.00 0.00 0.00 0.00 0,460.00 0.00 0.00 0.00 ,901.41	- - - -
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,800.79	\$	4,361.4 <sup>2</sup>	1
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		2,800.79 + \$	4,361.41	= \$ _	7,162.20
11.	State all other regular contributions to the expenses that you list in Sch Include contributions from an unmarried partner, members of your household, other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are Specify:	, your dependen		•		+\$	0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. T Write that amount on the Summary of Schedules and Statistical Summary of					\$	7,162.20
13.	Do you expect an increase or decrease within the year after you file this	s form?				Combir	ned y income

No.

Yes. Explain:

Fill	in this informa	ation to identify yo	our case:					
	otor 1	Michael Edv		castor		Check	if this is:	
		WIICHAEI EUW	vaiu Laii	Caster			n amended filing	
	otor 2 ouse, if filing)	Adrianne Mi	chelle La	ancaster			supplement show xpenses as of the	ing postpetition chapter 13 following date:
Unit	ted States Bank	kruptcy Court for the		E DISTRICT OF TENNESS /ILLE DIVISION	SEE,	N	MM / DD / YYYY	
1	se number nown)							
		orm 106J						
		J: Your I						12/15
info (if k	ormation. If n	nore space is nee wer every question ribe Your House	eded, attac on.	If two married people are ch another sheet to this fo	filing together, both	n are equally ny additiona	responsible for s I pages, write you	supplying correct ur name and case number
1.	□ No. Go t							
		es Debtor 2 live i	n a separa	ate household?				
	<b>■</b> 1		st file Offici	al Form 106J-2, <i>Expenses</i> i	for Separate Househ	oldof Debtor 2	2.	
2.	Do vou hav	e dependents?	■ No					
	•	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state dependents							☐ No ☐ Yes
3.	expenses of	penses include of people other th nd your depende	nan _	No I Yes				☐ Yes
exp	imate your e	a date after the b	our bankrı	y Expenses uptcy filing date unless yo is filed. If this is a supple				
valı		ssistance and ha		government assistance if yed it on Schedule I: Your I			Your exp	enses
4.		or home owners and any rent for the		ses for your residence. In	clude first mortgage	4. \$		1,304.81
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's	, or renter's	s insurance		4b. \$		0.00
		e maintenance, re	•			4c. \$		200.00
_		eowner's associati				4d. \$		200.00
5.	Additional	mortgage payme	ents for yo	our residence, such as hom	ne equity loans	5. \$		0.00

Official Form 106J

Debtor 1 Lancaster, Michael Edward & Lancaster, Adrianne Debtor 2 Michelle	Case number (if known)	
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$ <b>300</b> .	
6b. Water, sewer, garbage collection		.40
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <b>553</b> .	
6d. Other. Specify:		.00
7. Food and housekeeping supplies	7. \$ <b>1,200</b> .	
3. Childcare and children's education costs		.00
. Clothing, laundry, and dry cleaning	9. \$100.	
Personal care products and services	10. \$100.	
Medical and dental expenses	11. \$100.	.00_
<ol><li>Transportation. Include gas, maintenance, bus or train fare.</li><li>Do not include car payments.</li></ol>	12. \$ <b>500</b> .	.00
3. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <b>100</b> .	
4. Charitable contributions and religious donations		.00
5. Insurance.	· · · · · · · · · · · · · · · · · · ·	.00
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	.00
15b. Health insurance	15b. \$ <b>271</b> .	.00
15c. Vehicle insurance	15c. \$ <b>250</b> .	.00
15d. Other insurance. Specify:	15d. \$ <b>0</b> .	.00
<ol><li>Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:</li></ol>	16. \$ <b>0</b> .	.00
7. Installment or lease payments:	47 0	
17a. Car payments for Vehicle 1	17a. \$696.	
17b. Car payments for Vehicle 2	17b. \$ <b>780</b>	
17c. Other Specify: Furniture loan	17c. \$320.	
17d. Other. Specify:		.00_
<ol><li>Your payments of alimony, maintenance, and support that you did not rep deducted from your pay on line 5, Schedule I, Your Income (Official Form</li></ol>		.00
9. Other payments you make to support others who do not live with you.		.00
Specify:	19.	
0. Other real property expenses not included in lines 4 or 5 of this form or or	Schedule I: Your Income.	
20a. Mortgages on other property		.00
20b. Real estate taxes	20b. \$ <b>0</b> ,	.00
20c. Property, homeowner's, or renter's insurance		.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ <b>0</b> ,	.00
20e. Homeowner's association or condominium dues		.00
1. Other: Specify:	21. +\$ 0.	.00
2. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$ 7,078.21	1
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 1	06J-2 \$	_
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 7,078.21	ī
3. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <b>7,162</b> .	20
23b. Copy your monthly expenses from line 22c above.	23b\$ 7,102	
		<del></del> -
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ 83.	.99
24. Do you expect an increase or decrease in your expenses within the year at For example, do you expect to finish paying for your car loan within the year or do you exmodification to the terms of your mortgage? No.		se of a
Yes. Explain here:		

Fill in this in	formation to identify ye	our case:		
Debtor 1	Michael Edward			
	First Name	Middle Name	Last Name	}
Debtor 2	Adrianne Michell		Last Name	Į.
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF TENNES	SEE, NASHVILLE DIVISION	
Case number				
(if known)				☐ Check if this is an amended filing
f two married pe You must file this obtaining money	ople are filing together	n connection with a bankruptcy ca		
Sign	n Below			
Did you pay	y or agree to pay some	one who is NOT an attorney to hel	p you fill out bankruptcy forms?	
■ No				
☐ Yes. N	Name of person			nkruptcy Petition Preparer's Notice, on, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the summary and	schedules filed with this declaration	on and
X /s/ Mic	hael Lancaster		X /s/ Adrianne Lancaster	
Michae	el Edward Lancaster		Adrianne Michelle Lancast	er
Signatur	re of Debtor 1		Signature of Debtor 2	
Date _	August 25, 2019		Date <b>August 25, 2019</b>	

Bummary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible, if two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 65, Total real estate, from Schedule A/B		Fill in thi	s information to identify your case:		
Debbr 2	Del	btor 1	Michael Edward Lancaster		
United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE, NASHVILLE DIVISION  Case number   Check if this is an amended filing    Official Form 106Sum   12/15    Summary of Your Assets and Liabilities and Certain Statistical Information   12/15    Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information, Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 13: Summarize Your Assets  Your assets  Your assets  Your assets  Your assets  Your poly in 55, Total real estate, from Schedule A/B. \$ 200,000.0f.  1b. Copy line 52, Total of all property on Schedule A/B. \$ 88,134.0f.  1c. Copy line 63, Total of all property on Schedule A/B. \$ 88,134.0f.  1c. Copy line 63, Total of all property on Schedule A/B. \$ 288,134.0f.  1c. Copy line 63, Total of all property on Schedule A/B. \$ 288,134.0f.  2c. Schedule D. Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column Admount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 282,804.0f.  3b. Copy the total you listed in Column Admount of claims, from line 6e dischedule E/F. \$ 0.0f.  3c. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E)F. \$ 175,180.5f.  Your total liabilities \$ 175,180.5f.  Your contained monthly income from line 12 dischedule I \$ 175,180.5f.  Your contained monthly income from line 12 dischedule I \$ 7,078.2f.  All Schedule I: Your Income(Official Form 106I)  Copy your conthined monthly income from line 12 dischedule I \$ 7,078.2f.  All Schedule I: Your Income (Official Form 106I)  Copy your conthined monthly income from line 12 dischedule I \$ 7,078.2f.  All Schedule I: Your hoome(Official Form 106I)  Copy your monthly expenses from line 22c of Schedule I \$ 7,078.2f.  No. You h	D-1	h4 0			
Case number   Check if this is an amended filing					
Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Ba as complete and accurate a spossible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your before assets  Your assets  You	Uni	ited States Bar	okruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE, NASHVILLE DIVISION		
Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Ba as complete and accurate a spossible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your before assets  Your assets  You	Cas	sa numhar			
Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate a spossible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part II: Summarize Your Assets  Your asset		_		☐ Chec	k if this is an
Bummary of Your Assets and Liabilities and Certain Statistical Information  12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill tout all of your schedules first then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Your Assets				amen	nded filing
Bummary of Your Assets and Liabilities and Certain Statistical Information  12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill tout all of your schedules first then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Your Assets					
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part 1:   Summarize Your Assets   Your assets					
Information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part 1:   Summarize Your Assets					
Your assets   Value of what you own	info	rmation. Fill o	ut all of your schedules first; then complete the information on this form. If you are filing amended		
Schedule A/B: Property (Official Form 106A/B)   1a. Copy line 55, Total real estate, from Schedule A/B	Par	rt 1: Summa	arize Your Assets		
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B					
1a. Copy line 55, Total real estate, from Schedule A/B.  1b. Copy line 62, Total personal property, from Schedule A/B.  1c. Copy line 63, Total of all property on Schedule A/B.  288,134.0l  Part 2: Summarize Your Liabilities  Your liabilities  Your liabilities  Your liabilities  Amount you owe  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D.  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e 38chedule E/F.  3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j 38chedule E/F.  Your total liabilities  Your total liabilities  4 55chedule 1: Your Income and Expenses  4. Schedule 1: Your Income (Official Form 106I) Copy your combined monthly income from line 12 o&chedule I.  5 Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J.  6. Are you filling for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  7 Yes  What kind of debt do you have?				Value	of what you own
1c. Copy line 63, Total of all property on Schedule A/B	1.			\$	200,000.00
Part 2: Summarize Your Liabilities  Your liabilities Amount you owe  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D  \$ 282,804.0f  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e d3chedule E/F  \$ 0.00  3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j d3chedule E/F  Your total liabilities  \$ 457,984.59  Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I  \$ 7,162.26  5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  \$ 7,078.2:  Part 4: Answer These Questions for Administrative and Statistical Records  6. Are you filing for bankruptcy under Chapters 7, 11, or 13?    No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.    Yes   Yes   What kind of debt do you have?		1b. Copy line	e 62, Total personal property, from Schedule A/B	\$	88,134.00
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F		1c. Copy line	e 63, Total of all property on Schedule A/B	\$	288,134.00
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e \$\frac{1}{2}\$\$ chedule E/F	Par	rt 2: Summa	arize Your Liabilities		
2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 282,804.0t  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F					
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e & Schedule E/F	2.			\$	282,804.00
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	3.			\$	0.00
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I		3b. Copy the	e total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	175,180.59
Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I					
4. Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I			Your total liabilities	\$	457,984.59
4. Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I					
Copy your combined monthly income from line 12 oSchedule I	Par	rt 3: Summa	arize Your Income and Expenses		
Copy your monthly expenses from line 22c of <i>Schedule J</i>	4.			\$	7,162.20
<ul> <li>6. Are you filing for bankruptcy under Chapters 7, 11, or 13?</li> <li>☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>☐ Yes</li> <li>7. What kind of debt do you have?</li> </ul>	5.			\$	7,078.21
<ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>Yes</li> <li>What kind of debt do you have?</li> </ul>	Par	rt 4: Answe	These Questions for Administrative and Statistical Records		
7. What kind of debt do you have?	6.	-		ther schedu	ıles.
7. What kind of debt do you have?		■ Vac			
Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal family or household	7.		f debt do you have?		
<ul> <li>Long Debts are Diffusion Consumer Debts, Consumer Debts are move incomed by an individual number of a narranal ramily of Artholecolog</li> </ul>		■ Vaur -l	ohte are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for an	oreonal fa	mily or household

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,669.10

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

		Fill in this information to id	lentify your case:					
Deb	otor 1		vard Lancaster		L - at Name			
Dob	otor 2	First Name	Middle Name		Last Name			
	use if,	7 tariamic im	chelle Lancaster Middle Name		Last Name			
Unit	ted S	States Bankruptcy Court for	the: MIDDLE DISTRICT OF	TENNES	SEE, NASHVILLE D	IVISION		
	se nu	mber					Object Williams	
(II KII	iowii)					_	Check if this is an amended filing	
Sta Be a infor	ate is co	mplete and accurate as po	al Affairs for Indiversible. If two married people led, attach a separate sheet to	are filing	together, both are e	qually responsible for suppl		
`	t 1:	, , , , , , , , , , , , , , , , , , ,	r Marital Status and Where Yo	ou Lived E	Sefore			
1.		at is your current marital s						
	_	<b>,</b>						
		Married Not married						
2.	Dur	ing the last 3 years, have	ou lived anywhere other thar	ı where y	ou live now?			
	<ul><li>No</li><li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul>							
	Del	btor 1 Prior Address:	Dates Debtor there	1 lived	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there	
<b>3.</b> state			u ever live with a spouse or le California, Idaho, Louisiana, N					
		No						
			Schedule H: Your Codebtors (O	fficial Forr	n 106H).			
Par	t 2	Explain the Sources of	Your Income					
4.	Fill i	n the total amount of incom	n employment or from operati e you received from all jobs and you have income that you receive	d all busine	esses, including part-	time activities.	dar years?	
		No						
		Yes. Fill in the details.						
			Dobtos d			Dahtar 2		
			Debtor 1	Cra	es incomo	Debtor 2	Gross income	
			Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Total amount

Amount you

still owe

Reason for this payment

**Dates of payment** 

Official Form 107

Yes. List all payments to an insider.

**Insider's Name and Address** 

Part 6: List Certain Losses

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15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Description and value of the property transferred

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**Date Transfer was** 

made

Yes. Fill in the details.

Name of trust

Pai	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposit	Boxes, and Stor	age Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of Type of account number instrument		unt or Date account was closed, sold, moved, or transferred		Last balance closing or			
21.	Do you now have, or did you have within 1 y cash, or other valuables?	vear before you filed for	bankruptcy, any	safe depo	osit box or other depos	itory for securi	ties,		
	No No								
	Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe t	the contents	Do you s have it?	still		
22.	Have you stored property in a storage unit of	or place other than your	home within 1 y	ear before	you filed for bankrupto	cy?			
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you s have it?	still		
	Libertife Brancote Verellald on Control	( O							
Pai	t 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	■ No								
	☐ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value		
		,							
Pai	t 10: Give Details About Environmental Info	ormation							
For	the purpose of Part 10, the following definition	ons apply:							
	Environmental law means any federal, state toxic substances, wastes, or material into the controlling the cleanup of these substances	e air, land, soil, surface							
	$\it Site$ means any location, facility, or property own, operate, or utilize it, including disposa	l sites.		•					
	Hazardous material means anything an envi material, pollutant, contaminant, or similar to		s a hazardous w	aste, haza	rdous substance, toxic	substance, ha	zardous		
Rep	ort all notices, releases, and proceedings tha	nt you know about, regar	dless of when th	ney occurr	ed.				
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?								
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, S ZIP Code)			onmental law, if you it	Date of n	otice		
		•							

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# **United States Bankruptcy Court Middle District of Tennessee, Nashville Division**

	Lancaster, Michael Edward & Lancaster	r, Adrianne Michelle	Case N	NO		
		Debtor(s)	Chapte	er <u>7</u>		
	DISCLOSURE OF COM	MPENSATION OF ATT	ORNEY FOI	R DEBTOR		
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$	1,000.00		
	Prior to the filing of this statement I have received	ived	\$	1,000.00		
	Balance Due		\$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed of firm.	compensation with any other pers	on unless they are	members and associates of my law		
	☐ I have agreed to share the above-disclosed comcopy of the agreement, together with a list of the					
5.	In return for the above-disclosed fee, I have agreed	l to render legal service for all asp	ects of the bankrup	otcy case, including:		
	<ul><li>a. Analysis of the debtor's financial situation, and</li><li>b. Preparation and filing of any petition, schedules</li><li>c. Representation of the debtor at the meeting of c</li><li>d. [Other provisions as needed]</li></ul>	s, statement of affairs and plan wh	ich may be require	d;		
6.	By agreement with the debtor(s), the above-disclose	ed fee does not include the follow	ving service:			
		CERTIFICATION				
	I certify that the foregoing is a complete statement bankruptcy proceeding.	of any agreement or arrangement	for payment to me	for representation of the debtor(s) is		
1	August 25, 2019	/s/ Robert Moye	er			
_	Date	Robert Moyer Signature of Attor				
		408 Franklin St Clarksville, TN				
		rhmoyer@bells				
		Name of law firm				